

**New Jersey Department of Environmental Protection
Division of Solid & Hazardous Waste**

Solid Waste Facility Monthly Disposal and Materials Recovery Report

Facility Name: _____

Program Interest # (6 digits): _____

Submitted By: _____

Phone #: _____

Reporting Period: _____

Month
Year

MONTHLY SUMMARY

NOTE	WASTE TYPES	SOLIDS	TOTAL AMOUNT (IN TONS)	
<p>The filing of this report is required by New Jersey Solid Waste Regulation N.J.A.C. 7:26-2.13(e). Failure to submit this report on a monthly basis may result in the imposition of a penalty per N.J.S.A. 13:1E-9 <u>et seq.</u> and/or revocation of license.</p> <p>A complete monthly report consists of one page each of Form DWM-006B-1, 2, and 3 (Part 1, Part 2, & Parts 3a, 3b, & 3c). Additional Part 2, 3a, 3b, & 3c forms must be filed for each final disposal facility and/or county of waste origin.</p> <p>All forms (Parts 1, 2, 3a, 3b, & 3c) must be submitted to the NJDEP (address below) within 20 days after the last day of each month.</p>	10	Municipal Waste		←
	13	Bulky Waste		←
	13C	Construction & Demolition Waste		←
	23	Vegetative Waste		←
	25	Animal & Food Processing Wastes		←
	27	Dry Industrial Waste		←
	27A	Asbestos/Asbestos-Containing Waste		←
	27I	Incinerator Ash		←
		Total Inbound Solid Waste		←
		Total Disposed as Solid Waste (From Part 2)		
		Total Recovered for Recycling (From Part 3b)		
		Total Recovered for Beneficial Reuse (From Part 3c)		

I certify that the information entered above is true to the best of my knowledge.

Signature: _____ Title: _____ Date: _____

**THIS FORM MUST BE SUBMITTED WITHIN 20 DAYS
AFTER THE LAST DAY OF EVERY MONTH TO:**

Mail Code: 401-02C

**NJ Department of Environment Protection
Division of Solid & Hazardous Waste
Bureau of Solid Waste Planning & Licensing
401 East State Street
P.O. Box 0420
Trenton, NJ 08625-0420
Attn: Pat Elias (609) 984-3438**

&

**Attn: County SW Coordinator of
the county where facility is located**

**For list, see Program web page at:
<http://www.state.nj.us/dep/dshw>**

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(Duplicate this form as necessary)

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Note: A separate (Part 3) page must be completed for each different “County of Waste Origin.” Report all waste in TONS.

[illegible]

(Duplicate this form as necessary)

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Note: Report all waste in TONS.

	WASTE (MATERIAL) TYPES RECOVERED FOR RECYCLING							
RECYCLING MARKET	10R	13R	13C-R	23R	25R	27R	27I-R	TOTAL TONS
TOTAL TONS								

(Duplicate this form as necessary)

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Note: Report all waste in TONS.

[illegible]

(Duplicate this form as necessary)